

Candidate signature (in ink)

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

of Massachusetts			
File with:		2015 OCT	23 A II: 3
City or Town Clerk or Election Commission Please print or type all inform	nation, except signatures.	F	ILE #
Fill in dates: Month Date Year	Month	CITY CLERK	, SALEH, HAS
Reporting Period Beginning JANUARY (2015	Ending OCTO	BER 16	Year 2015
Type of report: (Check one)	П20 4 0 1 1		
□8th day preceding preliminary □8th day preceding election	□30 day after election	☐year-end report	□dissolution
STEVEN A PINTO	THE PINTO	COMMITTIME	EE)
Full Name of Candidate (if applicable)	Committ	1	
MARDI COUNCILLOR	HIDAN P	Burting	
55 Columbus AVE	Name of Comm	0	
Residential Address	Committee Ma	SVA NVE	
5121EM 21970	SALEM	01970	
Tel. No. (optional)		Tel. No. (op	otional)
SUMMARY BALANCI		1 216 2-	
Line 1: Ending balance from previous		1,416.40	
Line 2: Total receipts this period (page	se 2, line 11)	-0-	
Line 3: Subtotal (line 1 plus line 2)	\$	1,216,20	
Line 4: Total expenditures this perio	d (page 3, line 14) \$	-0-	1
Line 5: Ending balance (line 3 minus line	4) \$	1,216,20	1
Line 6: Total in-kind contributions this	period (page 4) \$	~ 6	
		950	
Line 7: Total (all) outstanding liabilities		2 2 2	
Line 8: Name of bank(s) used	CASTER	W]
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the	and affirm branched and ballaf		
finance activity, including all contributions, loans, receipts, expenditures, disbursement	k, in-kind contributions and liabili	ties for this reporting period	and represents the
campaign finance activity of all persons acting under the authority or on behalf of this of Signed under the penalties	committee in accordance with the i	requirements of M.G.L. c. 5	5.
W. Sut	OCTO	I WIL DAR	219
Treasurer's signature (in ink)		Date	
FOR CANDIDATE FILINGS ONL	Y: (CANDIDATE MUST SIC	GN BELOW)	
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the b finance activity, of all persons acting under the authority or on behalf of this committee contributions, incurred any liabilities nor made any expenditures on my behalf during the Candidate without Committee OR Candidate with independent activity filling at I certify that I have examined this report including attached schedules and it is, to the b finance activity, including contributions, loans, receipts, expenditures, disbursements, i campaign finance activity of all persons acting under the authority or on behalf of this comparison.	e in accordance with the requirements is reporting period. eparate report est of my knowledge and belief, and helief, and contributions and liabilities ommittee in accordance with the results.	ents of M.G.L. c. 55. I have true and complete statements for this reporting period as	t of all campaign

Date

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)		ount	Occupation & Employer (for contributions of \$200 or more)
			13	
				:
Line 9: To	otal receipts in excess of \$50 (or listed above)			
	otal receipts \$50 and under* (not listed above)			
	OTAL RECEIPTS IN THE PERIOD	-01		Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid	Address	Purpose of Expenditure	Amoun
	(alphabetical listing)			
			2	
	-			
		Line 12: E	Expenditures over \$50	
		Line 13: E	Expenditures \$50 and under*	
En	iter on page 1, line 4	Line 14:T	OTAL EXPENDITURES	101

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*		Description of Contribution	Value
	w)			
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	-0-

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Aug)	STEVEN PINTO	55 co Lumbus Au	MONIO	50
Aug/ 23/2003		55 Cohumbus AVE	campaign Loan	800
r	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	850

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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